PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 09/846, 722 C 5/1-0-005c3													P
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY	OR	OTHER		
TOTAL CLAIMS			30				Г	RATE	FEE	1	RATE	FEE	
FO	R	NUMBER FILED		NUMBER EXTRA		В	asic fe	355.00	OR	BASIC FEE	710.00	1	
70	TAL CHARGEA	30 minus 20=		. 10		Γ	X\$ 9=	90	OR	X\$18=	180		
IND	EPENDENT CL	<i>3</i> minus 3 =		. 6			X40-		OR	Xốo₂	-	İ	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=	1		+270=		i
* If the difference in column 1 is less than zero, enter "0" in colu						column 2	L	TOTAL	4,	OR OR	TOTAL	290	
GLAIMS AS AMENDED - PART II								IOIAL	٠ <u>ــــــــــــــــــــــــــــــــــــ</u>	Jon	OTHER		1
_	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	ОЯ	SMALL].
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVH PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	راه داع
MENDMENT	Total	· 31	Minus	.30)	-/		X\$ 9=		OR	X\$18=	į	3,
	Independent	. 3	Minus	2	<u> </u>	=/_	Γ	X40=		ОЯ	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135 -		OR	+270=	1	٠.
							L	TOTAL			TOTAL		ł
2	(Column 1) (Column 2) (Column 3)							OIT, FEE		,	ADDIT. FEE		1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	.3/_	Minus	3		•	-	X\$ 9=	1.19.4	OR	X\$18=		***
ME	Independent	- 3	Minus	*** -	3			X40=		OR	X80=		l
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	ENUEN	CLAIM	لبالب		+135=		OR	+270=		ï.
; n							Ŀ	· YOTAL		OR	TOTAL		•
Č	1-1-05	(Column 1)		(Colu	mn 2)	(Cotumn 3)	A	OIT. FEE			AUUI I. PEEI		
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HEGI NUM PREVI	IEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	¥3.
	To(a)	. 31	Minus	3	3.1	=		xz6=		OR	X\$18=		N.33
AMENDMENT	independent	• 3	Minus.		3	• >		X40=		OR	X80=		1
Ľ		NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		ŀ				+270-	·	1
	1, 19,	aran 1 is leas itan i	he entry in cob	omn 2. writ	a TO in co	puma 3.	L	135= 1014	1	OR			l .
**	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is tass than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO 675

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